



Economic Impact Analysis Virginia Department of Planning and Budget

18 VAC 85-40 – Regulations Governing the Practice of Respiratory Care Department of Health Professions December 14, 2004

The Department of Planning and Budget (DPB) has analyzed the economic impact of this proposed regulation in accordance with Section 9-6.14:7.1.G of the Administrative Process Act and Executive Order Number 25 (98). Section 9-6.14:7.1.G requires that such economic impact analyses include, but need not be limited to, the projected number of businesses or other entities to whom the regulation would apply, the identity of any localities and types of businesses or other entities particularly affected, the projected number of persons and employment positions to be affected, the projected costs to affected businesses or entities to implement or comply with the regulation, and the impact on the use and value of private property. The analysis presented below represents DPB's best estimate of these economic impacts.

Summary of the Proposed Regulation

The Board of Medicine (board) proposes to permit "courses directly related to the practice of respiratory care as approved by the American Medical Association for Category 1 CME credit" to qualify towards the continuing education that respiratory care practitioners are required to complete for license renewal.

Estimated Economic Impact

The current regulations state that "On and after January 1, 2005, in order renew an active license as a respiratory care practitioner, a licensee shall attest to having completed 20 hours of continuing respiratory care education as approved and documented by a sponsor of the AARC¹" during the preceding two years. The board estimated that such continuing education would cost from \$0 to \$20 per hour. In response to a petition for rulemaking, the board proposes to permit hours in "courses directly related to the practice of respiratory care as approved by the American

Medical Association (AMA) for Category 1 CME credit” to qualify towards the required 20 hours of continuing respiratory care education.

According to the Department of Health Professions, most respiratory care practitioners work for hospitals and are often offered free AMA-approved training onsite. In contrast, AARC courses are not typically onsite and free courses are not often available. The board determined that AMA-approved courses provide as much benefit as AARC courses.² Thus, allowing respiratory care practitioners to obtain their continuing education credits through AMA-approved respiratory care courses will enable licensees to save on fees and time and travel costs. To the extent that AMA-approved courses maintain and improve respiratory care practitioners’ knowledge and skills as well as AARC continuing education, the proposed amendment will produce net benefits.

Businesses and Entities Affected

The proposed regulations affect the 3,183 persons licensed as respiratory care practitioners in Virginia,³ their patients, and providers of continuing education.

Localities Particularly Affected

The proposed regulations potentially affect all Virginia localities.

Projected Impact on Employment

The proposal to permit AMA-approved courses directly related to the practice of respiratory care to qualify for continuing education credits required for respiratory care practitioner license renewal will likely increase the demand for these courses, and reduce demand for AARC courses. Consequently, AARC course provider employment may be reduced, while AMA-approved course instructor employment may increase.

Effects on the Use and Value of Private Property

The proposed amendment will likely increase participation in AMA-approved courses directly related to the practice of respiratory care, and reduce demand for AARC courses.

¹ AARC: American Association of Respiratory Care

² Source: Department of Health Professions

³ Source: Department of Health Professions